



**TOWN OF RIVERHEAD BUILDING DEPARTMENT**

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Leroy E. Barnes, Jr.  
*Building Department Administrator*

Sharon E. Klos  
*Building Permits Coordinator*

Richard P. Podlas  
*Building Inspector*

Richard E. Gadzinski  
*Electrical Inspector*

Jack Wherry  
*Inspector*

Mark Griffin  
*Inspector*

## **Outdoor Dining Permit Application**

Requirements for Outdoor Dining Permit, pursuant to Chapter 29 entitled "Outdoor Dining" July 22, 2004

1. An application for Outdoor Dining Permit with the name and address of applicant must be completed, signed and notarized.
2. One survey depicting the proposed site for the activity.
3. One sketch depicting the proposed layout of the outdoor dining area.
4. Disclosure application; signed and notarized.
5. The application shall be accompanied by a \$25.00 filing fee, payable to the Town of Riverhead.

### **Sidewalk Cafes:**

The Building Inspector is hereby authorized to grant revocable permits for the use of the sidewalks for sidewalk cafes upon the following terms and conditions. No sidewalk café may be operated except:

1. As an accessory to a restaurant or retail food store lawfully operating with a **valid Use permit** on the first floor of premises in the downtown zoning use districts.
2. On the sidewalk adjoining the principal place of business of such entity no closer than three feet from the curb.
3. By the entity which operates the restaurant or retail food store.

Town of Riverhead  
Suffolk County, New York

**Application for Outdoor Dining Permit**

Tax Map No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Application No. \_\_\_\_\_ Date \_\_\_\_\_ Permit No. \_\_\_\_\_ Date \_\_\_\_\_

Permit Expires \_\_\_\_\_ Zoning District \_\_\_\_\_ Disapproved Zoning \_\_\_\_\_

Approved By \_\_\_\_\_ Building Fee \_\_\_\_\_ Electric Fee \_\_\_\_\_ Receipt No. \_\_\_\_\_

**All information below to be filled out by applicant. A permit must be obtained before the intended use. This application is to be submitted depicting the proposed site for activity, along with a sketch plan depicting the proposed layout of the Outdoor Dining Area.**

The **OWNER** of the property is: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

The person responsible for the operation of the outdoor café and compliance with the Zoning Code is:

Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Phone No. \_\_\_\_\_ Cell No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Physical Location: \_\_\_\_\_

Will the dining area be located on Municipal Property? Yes ☐ No ☐

Amount of Bond (To be determined by Town Attorney) \$ \_\_\_\_\_

**All outdoor dining areas must be arranged to comply with the New York State Fire Prevention and Building Code and the Town Code of the Town of Riverhead**

**AFFIDAVIT:**  
**Town of Riverhead)**  
**County of Suffolk) S.S.**  
**State of New York)**

I swear that to the best of my knowledge and belief the statements contained in this application, together with the plans and specifications submitted, are true and complete statements of proposed dining area to be done on the described premises and that all provisions of the **New York State Fire Prevention and Building Code, and the Town Code of the Town of Riverhead**, and all other laws pertaining to the proposed dining area shall be complied with, whether specified or not, and that all inspections are authorized by the owner and the person responsible for the operation of **the Outdoor Dining Area, and that the property has no outstanding violations.**

\_\_\_\_\_  
Signature of Applicant

Sworn to before me this \_\_\_\_\_ day

Of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
(Notary Public, Suffolk County, New York)

**Read this document carefully.  
You may consult your attorney before completing.**

**Disclosure Affidavit**

**STATE OF NEW YORK)**

SS:

COUNTY OF SUFFOLK)

I, \_\_\_\_\_ an applicant for the following  
relief: \_\_\_\_\_ and being duly sworn, deposes and says:  
under the penalty of perjury and swear to the truth thereof.

**That I understand that this affidavit is required by Section 809 of the General Municipal Law and that a**  
knowing failure to provide true information is punishable as a misdemeanor. Being so warned, I state:

That \_\_\_\_\_ is a State Officer, is an officer or employee of Riverhead Town  
(Name of Relative)  
and:

☐ ***Check here if not applicable (i.e., you have no relative working for the Town of Riverhead.)  
and please sign below before a notary public.***

*That this person has an interest in the person, partnership or association requesting the above stated relief.*

That for the purpose of this section, an officer or employee shall be deemed to have an interest in the applicant where he, his spouse, or their brothers, sisters, parents, children, grandchildren or the spouse of any of them.

- a. is an applicant,
- b. is an officer, director, partner or employee of the applicant,
- c. legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association, applicant, or
- d. is a party to an agreement with such an application, express or implied whereby he may receive any payment or other benefit, whether or not for services rendered, dependant or contingent upon the favorable approval of such application, petition or request.
- e. That ownership of less than five (5) per cent of the stock of a corporation whose stock is listed on the New York or American Stock Exchange shall not constitute an interest for the purpose of this section.

\_\_\_\_\_  
(Signature)

Sworn to before me this \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public